

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/801,980	
	Filing Date	03/08/2001	
	First Named Inventor	LAUGHLIN	
	Art Unit	1648	
	Examiner Name	ZACHARIAH	
Total Number of Pages in This Submission	15	Attorney Docket Number	IN01144

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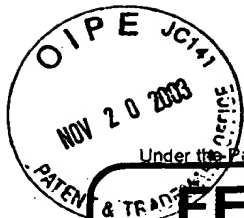
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<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	SCHERING-PLOUGH CORPORATION PATENT DEPARTMENT K-6-1-1990 THOMAS D. HOFFMAN REG. NO. 28,221
Signature	<i>Thomas D Hoffman</i> Nov 17 2003
Date	November 17, 2003

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PTO/SB/17 (10-03)
Approved for use through 07/31/2008. OMB 0651-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003, Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 530.00

Complete if Known

Application Number 09/801,980

Filing Date 03/08/2001

First Named Inventor LAUGHLIN

Examiner Name ZACHARIAH

Art Unit 1648

Attorney Docket No. IN01144

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TECH CENTER 1600/2900

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit
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Deposit
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Name

19-0365

Schering-Plough Corporation

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FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X	
Multiple Dependent	-3** =	X	

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	\$420.00
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) TERMINAL DISCLAIMER

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 530.00

\$110.00

SUBMITTED BY

Name (Print/Type) THOMAS D. HOFFMAN

Registration No. 28,221

Telephone 908-298-5037

Signature

Thomas D Hoffman

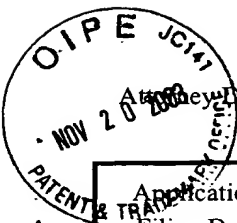
Nov 17 2003

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Application Docket No.: IN01144

PTO/SB/92 (08-03)
(Modified)

Application No.: 09/801,980

Filing Date: 03/08/2001

Applicant: MARK A. LAUGHLIN

Title: HIV IMMUNE ADJUVANT THERAPY

Certificate of Mailing under 37 CFR 1.8

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Documents enclosed:

FEE TRANSMITTAL SHEET (1 page)

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TERMINAL DISCLAIMER (1 page)

RESPONSE TRANSMITTAL (1 page)

AMENDMENT (9 pages)

CERTIFICATION OF MAILING (1 page)

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